118000253846

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COVER LETTER

TO:	Registration Se Division of Co		• .			
end te	·cr.	SERDAM TRANSPORT	ATION LLC			
SUBJE	CT:	Name of Lin	nited Liability Company	· 		
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please i	return all correspo	ondence concerning this matter	to the following:			
			CLAUDIA BAEZ			
			Name of Person			
		C&C BUSINESS MULTISERVICE LLC				
		Firm/Company				
		516 E 28TH STREET				
		Address				
	HIALEAH, FL 33013					
City/State and Zip Code						
		ccbusinessmultiservice@gr				
		E-mail address: (to be used for future annual report notifi	cation)		
For furt	her information c	oncerning this matter, please c	all:			
CLAU	DIA BAEZ		305 900-9225			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclose	d is a check for th	ne following amount:				
\$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

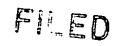
TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 JAN 14 PM 12: 45

SERDA	M TRANSPORTATION L	LC SEE	0: FM 12: 45
(Name of the Limited L. (A F	iability Company as it now ap Iorida Limited Liability Compa	pears on our records. ny)	LEAHASSEE, PLE
the Articles of Organization for this Limited Liabil lorida document number L18000253846			~
his amendment is submitted to amend the following	ng:		
a. If amending name, enter the new name of the	e limited liability compan	y here:	
he new name must be distinguishable and contain the words	"Limited Liability Company."	the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable	<u></u>		
Principal office address MUST BE A STREET A	DDRESS)		
3. If amending the registered agent and/or registered agent and/or the new registered office	registered office address	s on our records,	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	r Florida street address	
_		Flo	ridaZip Code
	City		Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:		
hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as register being filed to merely reflect a change in the register property has been notified in writing of this characters.	ind complete performanc red agent as provided for istered office address, I h	e of my duties, and in Chapter 605, F	d I am familiar with and F.S. Or, if this document i

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ENEIDA D. FUENTES	5275 NW 7TH ST	
		UNIT 512	■ Add
		OMT STE	□ Remove
		MIAMI, FL 33126	
			☐ Change
			Add
			□ Remove
			Change
			□ Add
		 	☐ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			Change
			□ Remove
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not meet th	ie applicable statu	filing or more than tory filing require	(optional) 90 days after filing.) Pu ements, this date wil	rsuant to 605.0207 I not be listed as t
ne record specifies a delayo The 90th day after the re	ed effective date, cord is filed.	but not an eff	ective time, a	t 12:01 a.m. on	the earlier of
JANUARY 7th	20	19			
	Hascu	n			
	Signature of a member	er or authorized repi	resentative of a mer	nber	
	SERGIO GARCI	Δ			
		d or printed name o	f sivner		